

SEP 07 2005

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FACSIMILE COVER LETTER

To: Commissioner for Patents
Examiner Lee, Michael

Firm: U.S. Patent and Trademark Office
Art Unit 2614

Facsimile: (571) 273-8300

From: Thomas F. Presson

Date: September 7, 2005

Re: FLH Ref No.: 450101-03388
Serial No: 10/089,962

Number of Pages: 20
(including cover page)

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PATENT
450101-03388

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant : Masamichi Takayama
 Serial No. : 10/089,962
 Filed : August 10, 2001
 For : VIDEO SIGNAL PROCESSING DEVICE AND METHOD
 Examiner : Lee, Michael
 Art Unit : 2614

745 Fifth Avenue
 New York, NY 10151
 Tel: 212-588-0800

Commissioner for Patents
 P.O. Box 1450
 Alexandria, VA 22313-1450

Dear Sir:

Transmitted herewith is an amendment in the above-identified application.

- ☒ No additional fee is required.
☐ The fee has been calculated as shown below.
☐ This is an application of a small entity under 37 CFR 1.9(f), and the amounts shown in parentheses apply.

Claims as Amended

(1)	(2) Claims remaining after amendment	(3)	(4) Highest number previously paid for	(5) Present extra	(6) Rate	(7) Additional Fee
Total claims	21	Minus	** = 26	* 0 x	\$50 (25)	= \$ 0
Independent claims	18	Minus	*** = 22	* 0 x	\$200 (100)	= \$ 0
Total additional fee for this amendment						\$ 0

* If the entry in Column 2 is less than the entry in Column 4, write "0" in Column 5.

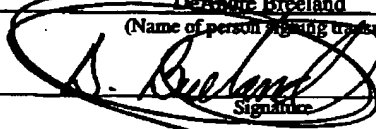
** If the highest number of total claims previously paid for is less than 20, write "20" in this space.

*** If the highest number of independent claims previously paid for is less than 3, write "3" in this space.

- ☐ This application contains a multiple dependent claim. The required fee of \$300 (150) has been previously paid ☐, or is paid herewith ☐.
- ☐ This response is being filed within the ___ month following the expiration of the term originally set therefor. This is a petition to request a ___ month extension of time. A check covering the cost of the petition is enclosed.
- ☐ A check in the amount of \$___ is attached, which covers the cost of ☐ additional claims x petition for extension of time.
- ☐ Charge \$___ to Deposit Account No. 50-0320.
- ☒ Please charge any additional fees incurred by reason of this response or credit any overpayment to Deposit Account No. 50-0320.

CERTIFICATE OF FACSIMILE

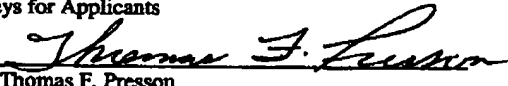
I hereby certify that this correspondence is being transmitted via facsimile to (571) 273-8300 on September 7, 2005.

DeAndre Breeland
 (Name of person signing transmittal)

 September 7, 2005
 Date of Signature

Respectfully submitted,

FROMMER LAWRENCE & HAUG LLP
 Attorneys for Applicants

By:


 Thomas F. Presson
 Reg. No. 41, 442

U.S. Application No. 10/089,962
Reply to Office Action dated June 7, 2005

PATENT
450101-03388

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

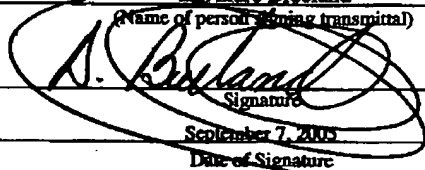
Applicant : Masamichi Takayama
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METHOD
Filed : August 10, 2001
Examiner : Lee, Michael
Art Unit : 2614
Confirmation No. : 1116

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DeAndre Breeland
(Name of person signing transmittal)

Signature
September 7, 2005
Date of Signature

AMENDMENT

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

In response to the Office Action mailed on June 7, 2005, having a three-month
statutory period for response set to expire on September 7, 2005, please amend the above-
identified application as follows.

U.S. Application No. 10/089,962
Reply to Office Action dated June 7, 2005

PATENT
450101-03388

Amendments to the Claims are reflected in the listing of claims, which begins
on page 3 of this paper.

Remarks/Arguments begin on page 14 of this paper.